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PTO/SB/21 (08-00)

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<h2 style="text-align: center;">TRANSMITTAL FORM</h2> <p style="text-align: center;">(to be used for all correspondence after initial filing)</p>		Application Number	09/834,747	
		Filing Date	April 13, 2001	
		First Named Inventor	STERNBERG, HAL	
		Group Art Unit	1616	
		Examiner Name	Choi, Frank I.	
Total Number of Pages in This Submission		12	Attorney Docket Number	BIOT-008
ENCLOSURES (check all that apply)				
<input checked="" type="checkbox"/> Fee Transmittal Form In Duplicate <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)		
		<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):		
Remarks				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT				
Firm or Individual Name	SUSAN C. TALL, Reg. No. 52,272			
Signature				
Date	December 9, 2003			

CERTIFICATE OF FACSIMILE TRANSMISSION	
I hereby certify that this correspondence is being facsimile filed under 37 C.F.R. §§ 1.6(d) and 1.8(a)(1)(b) addressed to: (703) 872-9306 on this date: December 9, 2003.	
Typed or printed name	Martha Cisneros
Signature	
Date	December 9, 2003

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P10/SB/17 (11-03)

Approved for use through 07/31/2004. OMIS 0081 0032
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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**FEE TRANSMITTAL
for FY 2004**

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT (\$)** 110.00**METHOD OF PAYMENT (check all that apply)**☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None☒ Deposit Account:

Deposit Account Number	50-0815
Deposit Account Name	Bozicevic, Field & Francis LLP

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments☐ Charge any additional fee(s) during the pendency of this application.☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity	Small Entity	Fee	Fee	Fee Description	Fee Paid
Code (\$)	Code (\$)	Code (\$)	Code (\$)		
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	100	2005	00	Provisional filing fee	

SUBTOTAL (1)**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

	Extra Claims	Fee from below	Fee Paid
Total Claims	-20** =	x	=
Indep. Claims	-3** =	x	=
Multiple Dependent			=

Multiple Dependent

Large Entity	Small Entity	Fee	Fee	Fee Description
Code (\$)	Code (\$)	Code (\$)	Code (\$)	
1202	10	2202	0	Claims in excess of 20
1201	06	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	06	2204	43	** Reissue independent claims over original patent
1205	18	2205	0	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

** or number previously paid, if greater; For Reissues, see above.

Complete If Known

Application Number	09/834,747
Filing Date	April 13, 2001
First named Inventor	STERNBERG, HAL
Inventor Name	CHOI, FRANK I.
Att Unit	1816
Attorney Docket No.	BIOT-008

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity	Small Entity	Fee	Fee	Fee Description	Fee Paid
Code (\$)	Code (\$)	Code (\$)	Code (\$)		
1001	130	2001	65	Surcharge - late filing fee or catch	
1002	140	2002	25	Surcharge - late provisional filing fee or cover sheet	
1003	130	1003	130	Non-English publication	
1012	2,520	1812	2,520	For filing a request for ex parte reexamination	
1004	920*	1304	920*	Requesting publication of CIR prior to Examination action	
1005	1,040	1005	1,840	Requesting publication of CIR after Examiner action	
1201	110	2201	65	Extension for reply within first month	110.00
1202	420	2202	210	Extension for reply within second month	
1203	950	2203	475	Extension for reply within third month	
1204	1,400	2204	740	Extension for reply within fourth month	
1205	2,010	2205	1,005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	830	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1404	1,510	1404	1,510	Petition to Intervene in a public use proceeding	
1405	110	2405	55	Petition to revive - unavoidable	
1406	1,330	2406	665	Petition to revive - unintentional	
1501	1,330	2501	065	Utility issue fee (for reissue)	
1502	180	2502	240	Design issue fee	
1503	040	2503	320	Plant issue fee	
1400	130	1400	130	Petitions to the Commissioner	
1607	00	1607	50	Processing fee under 37 CFR 1.17(g)	
1606	080	1606	180	Submission of Information Disclosures (first)	
0021	40	0021	40	Recording each patent assignment per property (lines number of properties)	
2001	770	2000	385	Filing a submission after final rejection (37 CFR § 1.120(b))	
2010	770	2010	385	For each additional invention to be examined (37 CFR § 1.125(b))	
1804	730	2801	385	Request for Continued Examination (RCE)	
1002	500	1002	000	Request for expedited examination of a design application	

Other fee (specify):


* Included by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

110.00

SUBMITTED BY

Name (Print/Type) Susan C. Tall

Signature **Complete (if applicable)**

Registration No. 52,272

Telephone (001) 833-7117

Date 12/09/2003

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